



Schmieding /ILC Solutions Forum on Elder Caregiving

June 2, 2005 ♦ 9 am -12 noon

Schmieding Conference on Elder Homecare

June 2, 2005 ♦ 12 noon - 4 pm

REPORT OF FINDINGS

JACK M.ROSENKRANZ, ESQ.

UTILIZATION OF AID &
ATTENDANCE/HOMEBOUND PENSION BY
VETERANS AND THEIR SURVIVORS TO
ACCESS LONG-TERM CARE IN THE HOME,
RESPIRE CARE & PRESCRIPTION
MEDICINE COVERAGE

UTILIZATION OF AID & ATTENDANCE/HOMEBOUND PENSION BY VETERANS AND THEIR SURVIVORS TO ACCESS LONG-TERM CARE IN THE HOME, RESPIRE CARE & PRESCRIPTION MEDICINE COVERAGE

TESTIMONY OF JACK ROSENKRANZ TO THE POLICY COMMITTEE OF THE WHITE HOUSE CONFERENCE ON AGING

Jack M. Rosenkranz has lectured on local, state, and national levels and has written extensively on such topics such as Medicaid, Medicare, and Elder and Disability Law. He is the managing partner of the Rosenkranz Law Firm with offices in Tampa and St. Petersburg. Since 1991 the firm has focused on legal services in elder law while maintaining active community involvement as an advocate for senior citizens. Jack has been selected by his peers as a Leading American Attorney in Elder Law and has the highest possible AV rating with Martindale Hubbell. He has been active in the Tampa Bay Estate Planning Counsel, Inc., National Academy of Elder Law Attorneys, The Florida Bar Elder Law Section, and is a past president of the Academy of Florida Elder Law Attorneys. In 1998, Jack was named the Outstanding Member of the Academy of Florida Law Attorneys and of the Florida Bar, Elder Law Section in 1995.

Home care benefits for our aging citizens are scarce. Medicare and Medicaid, the primary payor sources of care for the elderly offer limited coverage for home care. A significant number of veterans and their spouses are not accessing non-service connected pension benefits available for them through the Veterans Administration. These are forgotten homecare benefits overlooked by families and home healthcare providers.

For those individuals who qualify, the Aid and Attendance/Homebound programs provide money to pay for services that assist with such daily living activities as: eating, assistance in ambulatory functions, verbal contact to stimulate intellectual capacity, and assisting with speech and communications difficulties. Aid and Attendance/Homebound can be further utilized to pay for ancillary services that include: daily housekeeping, transportation to doctor appointments and shopping activities, laundry services, activities, semi-private room, and three meals per day. Benefit

payments through this program may be used to pay for a health companion, friend or relative who is caring for an elderly veteran or a veteran's spouse. Aid and Attendance/housebound also means entitlement to the VA pharmacy program.

Veterans should be made aware of benefits designed to pay for extraordinary out of pocket medical expenses. Under the Unreimbursed Medical Expenses portion of V.A. benefits, a veteran or their spouse can qualify for reimbursement of medical expenses that include family medical costs that have not been reimbursed and exceed 5% of the maximum pension payable. These unreimbursed medical expenses reduce almost dollar for dollar the countable income resulting in eligibility.

Qualifying for benefits is designed to be non-adversarial toward the veteran and guidelines are understandable. Generally speaking, a veteran will qualify for benefits if their net worth (excluding the single family home) falls below \$80,000 or their assets are not easily convertible to cash.

SUMMARY OF FINDINGS

The Aid and Attendance/Homebound programs offered by Department of Veterans Affairs is an excellent opportunity for veterans. Individuals who choose to take advantage of the program are able to compensate caregivers and other professionals to assist them in their most basic daily tasks. These programs were designed to enhance the quality of care, quality of life and preserve the dignity of those men and women who risked everything in defense of this great nation. Failure to utilize these programs causes our veterans and their families to suffer. The chart below lists the amounts available to veterans for Aid & Attendance:

Vet Aid & Attendance	Monthly	Yearly
Veteran		
No Dependents	\$1,412	\$16,995
One Dependent	\$1,674	\$20,099
Widower		
No Dependents	\$907	\$10,893
One Dependent	\$1,083	\$12,996

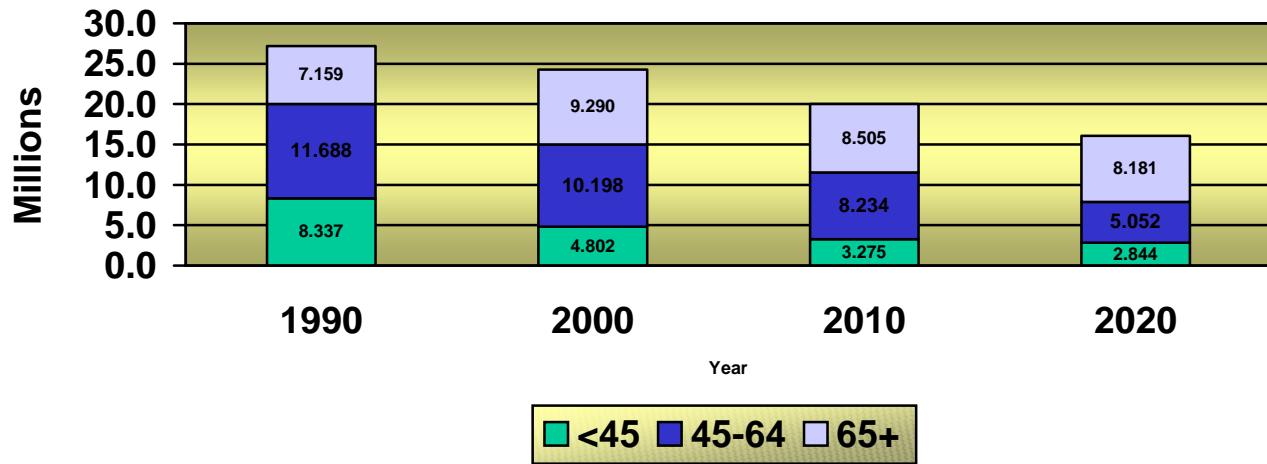
The Department of Veterans Affairs should begin a public relations campaign to inform veterans about the benefits that are available to them. Care providers, insurance companies, Medicare and Medicaid should also send out notices to their respective constituencies advising veterans of their entitlement to these benefits. In return these benefits will help our country's heroes and their spouses live comfortably in their twilight years. These men, women gave up their youth to protect our country; these programs enable them to preserve their dignity.

RECOMMENDATIONS AND REFORMS

- Care providers should be advocating utilization of Aid and Attendance/Homebound benefits for all veterans who utilize their services or access their systems for care
- All veterans should be educated about benefits that are available to them. Public relations campaigns should be utilized to reach veterans whose whereabouts are not current public record.
- Government, care providers, and the Veterans Administration should conduct extensive promotion of community living for veterans instead of institutionalization.
- Currently, if a veteran dies while the application for benefits is pending, the spouse receives no benefits. We must reform the system to provide care for surviving spouses of our veterans. Families of our heroes should not be excluded from benefits because of an administrative procedure that lasts six months or more.
- The time it takes for processing applications for benefits should be reduced by half the current standards.
- The system should have more specific definitions on asset limits to clarify the process. If a veteran is considering applying for benefits and they cannot understand the asset limits they may not apply for benefits, increasing financial burdens on other institutions.

Tables

Veteran Population by Age



Source: 1993 VA veteran population estimates and projections

Comparisons of Male Veterans vs. Adult Males

Percent of Veterans Among Adult U.S. Males

Age Group	1990	2000	2010	2020
65 or Over	55%	63%	49%	33%
75 or Over	28%	62%	61%	41%
85 or Over	17%	32%	66%	49%
ALL AGES	29%	24%	13%	13%

Sources: 1993 VA veteran population estimates and projections
and Bureau of the Census data